MAINE CULTIVATED GINSENG LICENSE APPLICATION

(New applications must be received by September 1)

MAINE DEPARTMENT OF AGRICULTURE (if you have never Division of Animal and Plant Health

SPACE FOR DEPARTMENT USE

	28 State House Station Augusta, Me 04333 (207) 287-3891			NEW REGISTRATION	AMOUNT REC'D DATE ISSUED REGISTRATION NO	
COMPANY NA	ME					
NAME OF APP	LICANT					
ADDRESS						
IF YOU ARE	A GROWER: Lo	cation of A	All Plantings			
County	Town	Stree	et Address			Acres of Ginseng
Road direction	ons to address:					
Map of Plantir	ngs:					
By signing this application, I certify that I will comply with all state and federal regulations pertaining to the production and trade of ginseng.			Check as appr	opriate:		
			GROWER (fe	ee \$10.00):		
			DEALER (fee \$25.00):			
Date:	Type/Print Applicant's Name:					
Phone: (W) (H) Email:			Signature of Applicant:			